



## I. IDENTIFICATION

01 STATE	02 SITE NUMBER
IN	000641943

## 01 SITE NAME (Legal, common, or descriptive name of site)

01 SITE NAME (Legal, common, or descriptive name of site)	02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER
Pollution Control Industries of America	4343 Kennedy Ave.

03 CITY	04 STATE	05 ZIP CODE	06 COUNTY	07 COUNTY CODE	08 CONG DIST
East Chicago	IN	46312	Lake	89	1

09 COORDINATES	LATITUDE	LONGITUDE	
	<u>41° 00' 38"N</u>	<u>87° 00' 27"W</u>	Whiting Quadrangle

10 DIRECTIONS TO SITE (Starting from nearest public road)  
From Indianapolis, I-65 N to 80 - 94 W., Exit on Cline Avenue driving north to Chicago Avenue, driving west to Kennedy Ave.. Turn right on Kennedy to the facility.

## 01 OWNER (If known)

01 OWNER (If known)	02 STREET (Business, mailing, residential)
PCIA Corporation	4343 Kennedy Avenue

03 CITY	04 STATE	05 ZIP CODE	06 TELEPHONE NUMBER
East Chicago	IN	46312	(219) 398-4321

07 OPERATOR (if known and different from owner)	08 STREET (Business, mailing, residential)
Kevin Prunsky, President	4343 Kennedy Ave.

09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER
East Chicago	IN	46312	(219) 397-3951

13 TYPE OF OWNERSHIP (Check one)

☒ A. PRIVATE    ☐ B. FEDERAL: \_\_\_\_\_  
(Agency name)

☐ C. STATE    ☐ D. COUNTY    ☐ E. MUNICIPAL

☐ F. OTHER: \_\_\_\_\_  
(Specify)

☐ G. UNKNOWN

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)

☒ A. RCRA 3001 DATE RECEIVED: 12 / 2 / 86  
MONTH DAY YEAR

☐ B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: / /  
MONTH DAY YEAR

☐ C. NONE

## 01 ON SITE INSPECTION

☒ YES      DATE 4 / 21 / 88  
☐ NO                      MONTH DAY YEAR

BY (Check all that apply)

☐ A. EPA      ☐ B. EPA CONTRACTOR      ☒ C. STATE      ☐ D. OTHER CONTRACTOR  
☐ E. LOCAL HEALTH OFFICIAL      ☐ F. OTHER: \_\_\_\_\_

**CONTRACTOR NAME(S):**

02 SITE STATUS (Check one)

☒ A. ACTIVE    ☐ B. INACTIVE    ☐ C. UNKNOWN

**03 YEARS OF OPERATION**

1986	present	
BEGINNING YEAR	ENDING YEAR	
		<input type="checkbox"/> UNKNOWN

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED

Solvents (toxic/persistent)	heavy metals (toxic/persistent)
oily wastes (flammable/soluble)	sludges (corrosive/incompatible)

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION

Fire Explosion (population/environment)  
Vapor Release (population)

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)

☐ A. HIGH (Inspection required promptly)    ☐ B. MEDIUM (Inspection required)    ☐ C. LOW (Inspect on time available basis)    ☒ D. NONE (No further action needed, complete current disposition form)

## 01 CONTACT

01 CONTACT  
Harry Atkinson

02 OF (Agency; Organization)

DEM

03 TELEPHONE NUMBER  
(317) 232-8927

04 PERSON RESPONSIBLE FOR ASSESSMENT

Dana Reed UPR 5/9/8

05 AGENCY
-----------

DEM

06 ORGANIZATION

SHWM

07 TELEPHONE NUMBER

(317) 232-8930

08 DATE
---------

5 / 5 / 88  
MONTH DAY YEAR





POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT  
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☒ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: 0 04 NARRATIVE DESCRIPTION

Groundwater is not used for drinking water. Contamination is possible if a tank leaks or if contents from a drum are spilled.

01 ☒ B. SURFACE WATER CONTAMINATION 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☒ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: 39,800 04 NARRATIVE DESCRIPTION

Lake Michigan surrounds East Chicago and is the drinking water source. The facility is less than three miles from the lake.

01 ☒ C. CONTAMINATION OF AIR 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☒ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: 39,800 04 NARRATIVE DESCRIPTION

Release is possible due to the types of waste accepted by PCIA for treatment.

01 ☒ D. FIRE/EXPLOSIVE CONDITIONS 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☒ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: 39,800 04 NARRATIVE DESCRIPTION

Potential. See C. above.

01 ☐ E. DIRECT CONTACT 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☐ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

None

01 ☒ F. CONTAMINATION OF SOIL 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☒ POTENTIAL ☐ ALLEGED  
03 AREA POTENTIALLY AFFECTED: 2 (Acres) 04 NARRATIVE DESCRIPTION

Facility was previously owned by SEPOA, Synthetic Energy Products of America; an industrial accident occurred and contamination may also have occurred.

01 ☐ G. DRINKING WATER CONTAMINATION 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☐ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: 39,800 04 NARRATIVE DESCRIPTION

See B. above.

01 ☒ H. WORKER EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☒ POTENTIAL ☐ ALLEGED  
03 WORKERS POTENTIALLY AFFECTED: 10 04 NARRATIVE DESCRIPTION

Workers potentially exposed if there is a release.

01 ☒ I. POPULATION EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☒ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: 39,800 04 NARRATIVE DESCRIPTION

Population potentially exposed through drinking water and fire and explosive conditions.



POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

unknown

01 ☐ K. DAMAGE TO FAUNA  
04 NARRATIVE DESCRIPTION (include name(s) of species)

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

unknown

01 ☐ L. CONTAMINATION OF FOOD CHAIN  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

unknown

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES  
(Spills/runoff/standing liquids/leaking drums)

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_

04 NARRATIVE DESCRIPTION

None observed during inspection.

01 ☒ N. DAMAGE TO OFFSITE PROPERTY  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☒ POTENTIAL

☐ ALLEGED

Potential for any runoff to damage or contaminate off-site property.

01 ☒ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☒ POTENTIAL

☐ ALLEGED

Potential see N. above

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING  
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: \_\_\_\_\_)

☐ POTENTIAL

☐ ALLEGED

None

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

None

III. TOTAL POPULATION POTENTIALLY AFFECTED: 39,800

IV. COMMENTS

PCIA assumed full response for the facility in December of 1986. The site has come a long way; is being run efficiently and is in compliance with state and federal hazardous waste regulations.

V. SOURCES OF INFORMATION (Cite specific references, e. g., state files, sample analysis, reports)

Site visit  
PCIA files

<b>FORM 1</b> <b>GENERAL</b>	 <b>EPA</b>	<b>U.S. ENVIRONMENTAL PROTECTION AGENCY</b> <b>GENERAL INFORMATION</b> <i>Consolidated Permits Program</i> <i>(Read the "General Instructions" before starting.)</i>	<b>I. EPA I.D. NUMBER</b> <div style="border: 1px solid black; padding: 2px;">             F I N D 0 0 0 6 4 6 9 4 3           </div>	
<b>LABEL ITEMS</b> <div style="border: 1px solid black; padding: 5px;"> <b>I. EPA I.D. NUMBER</b>  <b>III. FACILITY NAME</b>  <b>V. FACILITY MAILING ADDRESS</b>  <b>VI. FACILITY LOCATION</b> </div>		PLEASE PLACE LABEL IN THIS SPACE		
<b>GENERAL INSTRUCTIONS</b> If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.				
<b>II. POLLUTANT CHARACTERISTICS</b>				
<b>INSTRUCTIONS:</b> Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.				
<b>SPECIFIC QUESTIONS</b>		<b>MARK "X"</b> YES NO FORM ATTACHED	<b>SPECIFIC QUESTIONS</b>	
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		YES NO FORM ATTACHED X	B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		YES NO FORM ATTACHED X	D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)		YES NO FORM ATTACHED X	F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		YES NO FORM ATTACHED X	H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		YES NO FORM ATTACHED X	J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)	
YES NO FORM ATTACHED X				YES NO FORM ATTACHED X
<b>III. NAME OF FACILITY</b>				
1 <b>SKIP</b> Pollution Control Industries of America				
<b>IV. FACILITY CONTACT</b>				
A. NAME & TITLE (last, first, & title)			B. PHONE (area code & no.)	
2 Prunsky Kevin President			3 12 5 97 9500	
<b>V. FACILITY MAILING ADDRESS</b>				
A. STREET OR P.O. BOX				
3 4343 Kennedy Ave.				
B. CITY OR TOWN			C. STATE	D. ZIP CODE
4 East Chicago.			IN	4 6 3 1 2
<b>VI. FACILITY LOCATION</b>				
A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER				
5 4343 Kennedy Ave.				
B. COUNTY NAME				
Lake				
C. CITY OR TOWN			D. STATE	E. ZIP CODE
6 East Chicago			IN	4 6 3 1 2
F. COUNTY CODE (if known)				

CONTINUED FROM THE FRONT

## VII. SIC CODES (4-digit, in order of priority)

A. FIRST										B. SECOND									
(specify)										(specify)									
None Applicable																			
C. THIRD										D. FOURTH									
(specify)										(specify)									

## VIII. OPERATOR INFORMATION

A. NAME																									B. Is the name listed in Item VIII-A also the owner?				
Pollution Control Industries of America																									<input type="checkbox"/> YES <input type="checkbox"/> NO				
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)																				D. PHONE (area code & no.)									
F = FEDERAL S = STATE P = PRIVATE										M = PUBLIC (other than federal or state) O = OTHER (specify)										(specify)									
P										A										312 597 9500									
E. STREET OR P.O. BOX																													
4343 Kennedy Ave																													
F. CITY OR TOWN															G. STATE					H. ZIP CODE					IX. INDIAN LAND				
East Chicago															IN					46312					Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				

## X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)										D. PSD (Air Emissions from Proposed Sources)									
9 N										9 P									
B. UIC (Underground Injection of Fluids)										E. OTHER (specify)									
9 U										445 (specify) Air Poll. Control E. Chicago, Ind. - past operation									
C. RCRA (Hazardous Wastes)										F. OTHER (specify)									
9 R										91808910 (specify) Div. Land/Noise Pollution IEPA, IL - past operation									

## XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

## XII. NATURE OF BUSINESS (provide a brief description)


Collect, Store, and blend waste solvent materials to be utilized as a secondary fuel for re-sale to heavy industries (e.g. cement kilns, etc.). Store and treat waste residue.

Processing of the materials includes blending, filtering, dewatering, centrifugation, and distillation. All processes are not used on all materials.

Transportation of waste materials and secondary fuels is also a business activity PCIA is engaged in.

## XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)															B. SIGNATURE															C. DATE SIGNED									
Kevin Prunsky, President																														November 24, 1986									
COMMENTS FOR OFFICIAL USE ONLY																																							

FOR OFFICIAL USE ONLY

APPLICATION APPROVED		DATE RECEIVED (yr, mo, & day)			
23		24	-	10	

COMMENTS:

## II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

**A. FIRST APPLICATION** (place an "X" below and provide the appropriate date)

1. EXISTING FACILITY (See instructions for definition of "existing" facility.  
Complete item below.)

C	YR.		MO.		DAY	
8						
13	73	74	75	76	77	78

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day)  
OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED  
(use the boxes to the left)

- ☐ 2. NEW FACILITY (Complete item below.)

YR.		MO.		DAY	
73	74	75	76	77	78

FOR NEW FACILITIES,  
PROVIDE THE DATE  
(yr., mo., & day) OPERA-  
TION BEGAN OR IS  
EXPECTED TO BEGIN

B. REVISED APPLICATION (place an "X" below and complete Item I above)

- ☒ 1. FACILITY HAS INTERIM STATUS

- ☐ 2. FACILITY HAS A RCRA PERMIT

### III. PROCESSES - CODES AND DESIGN CAPACITIES

A. **PROCESS CODE** — Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

**B. PROCESS DESIGN CAPACITY** — For each code entered in column A enter the capacity of the process.

2. UNIT OF MEASURE — For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PRO- CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PRO- CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
<b>Storage:</b>			<b>Treatment:</b>		
CONTAINER (barrel, drum, etc.)	501	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	502	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	503	CUBIC YARDS OR CUBIC METERS		T03	TONS PER HOUR OR METRIC TONS PER HOUR
SURFACE IMPOUNDMENT	504	GALLONS OR LITERS	INCINERATOR	T03	GALLONS PER HOUR OR LITERS PER HOUR
<b>Disposal:</b>			<b>OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or inciner- ators. Describe the processes in the space provided; Item III-C.)</b>		
INJECTION WELL	D79	GALLONS OR LITERS		T04	GALLONS PER DAY OR LITERS PER DAY
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			
UNIT OF MEASURE CODE			UNIT OF MEASURE CODE		
UNIT OF MEASURE			UNIT OF MEASURE		
GALLONS.....	G	LITERS PER DAY.....	V	ACRE-FEET.....	A
LITERS.....	L	TONS PER HOUR.....	D	HECTARE-METER.....	F
CUBIC YARDS.....	Y	METRIC TONS PER HOUR.....	W	ACRES.....	B
CUBIC METERS.....	C	GALLONS PER HOUR.....	E	HECTARES.....	Q
GALLONS PER DAY.....	U	LITERS PER HOUR.....	H		

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

C										DUP										7/A C										1									
B. PROCESS DESIGN CAPACITY										B. PROCESS DESIGN CAPACITY										FOR OFFICIAL USE ONLY																			
A. PROCESS CODE (from list above)										1. AMOUNT (specify)										2. UNIT OF MEASURE (enter code)										FOR OFFICIAL USE ONLY									
LINE NUMBER										1. AMOUNT (specify)										2. UNIT OF MEASURE (enter code)										FOR OFFICIAL USE ONLY									
X-1 S 0 2										600										G										5									
X-2 T 0 3										20										E										6									
1 S 0 1										15,000										G										7									
2 S 0 2										243,400										G										8									
3 T 0 1										15,000										U										9									
4 T 0 4										7,500										U										10									

EPA I.D. NUMBER (enter from page 1)												FOR OFFICIAL USE ONLY											
W I N D 0 0 0 6 4 6 9 4 3												W DUP											
T/A C												T/A C											
1 2 3 4 5 6 7 8 9 10 11 12												13 14 15 16 17 18 19 20 21 22 23 24											
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																							
WASTE NO.		A. EPA HAZARD. WASTE NO. (enter code)		B. ESTIMATED ANNUAL QUANTITY OF WASTE		C. UNIT OF MEASURE (enter code)		D. PROCESSES															
								1. PROCESS CODES (enter)								2. PROCESS DESCRIPTION (If a code is not entered in D(1))							
1		F	0	0	3	3,120	T		S	0	1	S	0	2	T	0	1	T	0	4			
2		F	0	0	4	320	T		S	0	1	S	0	2	T	0	1	T	0	4			
3		F	0	0	5	4,160	T		S	0	1	S	0	2	T	0	1	T	0	4			
4		K	0	4	9	160	T		S	0	1	S	0	2	T	0	1	T	0	4			
5		K	0	5	1	320	T		S	0	1	S	0	2	T	0	1	T	0	4			
6		D	0	0	1	3,500	T		S	0	1	S	0	2	T	0	1	T	0	4			
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26																							



E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

SECRET

2. A  
ASAM  
72A  
11/1/82

40

S										T/A C		
F	I	N	D	0	0	6	4	6	9	4	3	6

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

All existing facilities must include photographs (*aerial or ground-level*) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (*see instructions for more detail*).

## LATITUDE (degrees, minutes, &amp; seconds)

4	1					3	8
41	46	47	68	68	-	71	

LONGITUDE (degrees, minutes, &amp; seconds)

8	7
72	74

75	76

2	7
77	79

☐ **A.** If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

**B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:**

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code &amp; no.)

E. JERRY CASTLE

2	1	9	-3	9	8	-4	3	2	1
---	---	---	----	---	---	----	---	---	---

3. STREET OR P.O. BOX

4. CITY OR TOWN

**3. ST.**

6. ZIP CODE

$$\frac{F}{F_0}$$

c
G+

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

**B. SIGNATURE**

C. DATE SIGNED

JERRM CASTLE

*Larry Castle*

November 24, 1986

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME: JEFFREY D. BROWN

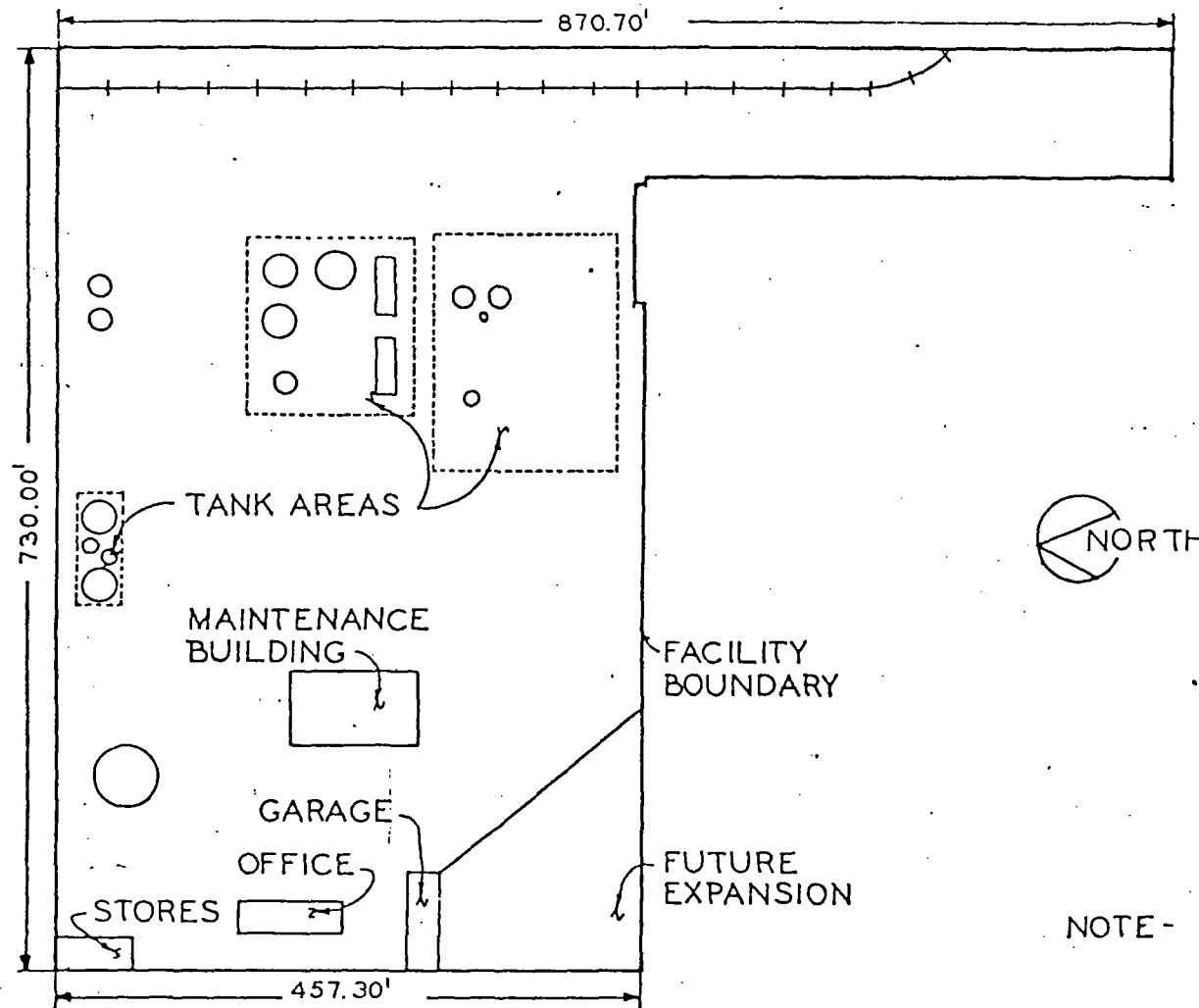
**B. SIGNATURE**

C DATE SIGNED

Kevin Prunsky

8. SIGNATURE

November 24, 1986



NOTE - TANKS NOT  
DRAWN TO SCALE.

NO.	DATE	REVISION	DWN	CK	ACC	APP

SCALE: 1" = 150'-0"

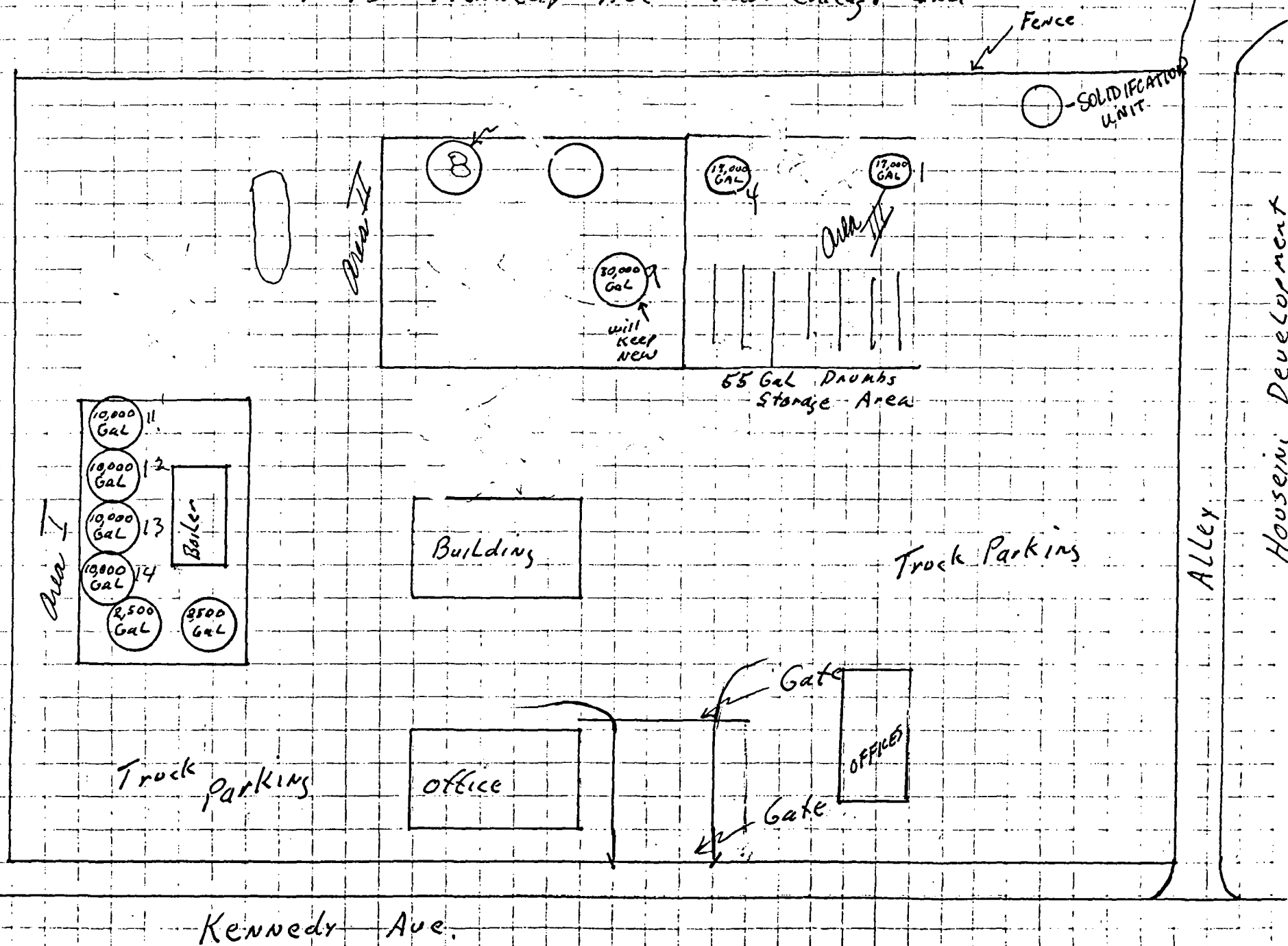
**ENVIRCO**  
CONSULTING ENGINEERS  
PROJECT

POLLUTION CONTROL OF AMERICA  
4343 KENNEDY AVENUE  
EAST CHICAGO, IL.

ENVIRCO ENVIRONMENTAL SERVICES, INC/  
310 ARMOUR ROAD, STE. 219  
NORTH KANSAS CITY, MO

# Present Site Plan of Pollution Control Industries of America

4343 Kennedy Ave East Chicago Ind



Pollution Control Industries of America (PCIA)

The Company's principal services are described below

A - Transportation

- 1- PCIA owns Tractors, Trailers, Tankers etc.

Vehicles are used in the collection and transportation of waste regulated under Resource Conservation Recovery Act (RCRA) from the generator to our treatment and storage facility.

B - Blending

- 1 - PCIA receives material drummed and tankers

Pump compatible material to blending tank, and pump blended material to bulk holding tanks for disposal.

C - Shredding Material

- 1 - Shredding system will separate liquid from product and re-package the shredded material for disposal in a landfill.

D - Solidify

- 1 - Sludges that are not amenable to treatment by other means, will be solidified prior to disposal at an E.P.A. approved facility.

## DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

INDIANAPOLIS

131

OFFICE MEMORANDUM

DATE: April 8, 1988

TO: Pollution Control Industries of America  
RCRA File  
IND 000646933, East Chicago, Lake County

THRU: Dave Berrey *pub*

FROM: Ted Warner *TW*  
Compliance Monitoring Section

SUBJECT: Trip Report for the Scheduled Inspection of  
March 9, 1988

On March 9, 1988, I conducted an interim status scheduled inspection of Pollution Control Industries of America (PCIA) located at 4343 Kennedy Avenue, East Chicago, Indiana. The facility was represented by Mr. Kevin Prunsky and Ms. Tita Lagrimas.

Preinspection File Audit

My preinspection file audit revealed that PCIA has notified and is operating as a transporter and treatment, storage facility for hazardous waste and hazardous waste derived fuels. Their process codes notification is for container storage (S01), tank storage (S02), tank treatment (T01), and blending (T04). The wastes they will be handling are (D001, F003, F004, F005, K049, and K051). At the time of this report PCIA is formally requesting approval to manage additional waste streams. Our Plan Review and Permit Section has not acted on this matter. PCIA holds no landfill waste approvals and there are no closed units at the site. The last inspection of this facility was on September 28, 1987. As a result of that inspection, a Warning Letter was issued. As of this date, that action has not been formally resolved although my inspection of this date reveals compliance with the request from our September 28, 1987, Notice of Violation.

Inspection Findings

My inspection included a record and document review with a complete tour of the facility. All of PCIA's records appeared to be in order. My tour of the facility revealed significant changes and improvements compared to my last tour. PCIA is close to completing double lining for all of their waste management units and associated plumbing. The double liners consist of six-inches of concrete, a 6-mill synthetic liner, and eight additional inches of concrete. Area 3, the container storage area, had 275, 55-gallon containers in storage. The storage tanks had 49,800-gallons of hazardous waste in storage. I did not note any violations during my tour of the site.

Pollution Control Industries of America  
RCRA File  
Page 2  
April 8, 1988

Conclusions and Recommendations

PCIA appears to be in compliance with state and federal hazardous waste management regulations. Therefore, I will prepare a Letter of compliance for Mr. Jim Hunt's consideration.

TFW/rmw

3/15/88

Visual Site Inspection  
Solid Waste Management Unit  
Description Form

UNIT CHARACTERISTICS: Area I

Type of Unit- Storage tanks, 4 10,000 gallon each

Age of Unit- 1 year

Location of Unit- North of the office 300 feet

General Physical Condition of Unit- Good condition

Type of Wastes Placed In Unit- Liquid solvent type wastes

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Possible Migration Pathways from this Unit- Air, groundwater

Observed Releases from Unit (describe)-

None

Proximity to Nearest Residence, Waterway, or other Exposure Potential-

300 feet from the office building and 150 feet from the maintenance building

Comments -

Possible migration by groundwater is very slight

Visual Site Inspection  
Solid Waste Management Unit  
Description Form

UNIT CHARACTERISTICS: Area II

Type of Unit- Storage tanks, 2, 30,000 gallons each

Age of Unit- 1 year

Location of Unit- East of the office 375 feet

General Physical Condition of Unit- Good condition

Type of Wastes Placed In Unit- Liquid solvent wastes

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Possible Migration Pathways from this Unit- Air, groundwater

Observed Releases from Unit (describe)-

None

Proximity to Nearest Residence, Waterway, or other Exposure Potential-

Approximately 180 feet from the maintenance building and 375 feet from the office

Comments -

Migration from groundwater is very slim



Visual Site Inspection  
Solid Waste Management Unit  
Description Form

UNIT CHARACTERISTICS: Area III

Type of Unit- Drum storage area

Age of Unit- 1 year

Location of Unit- 150 feet southeast of maintenance building

General Physical Condition of Unit- Good condition

Type of Wastes Placed In Unit-

Drummed wastes, chiefly solvents, some solid wastes

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Possible Migration Pathways from this Unit- Air, groundwater

Observed Releases from Unit (describe)-

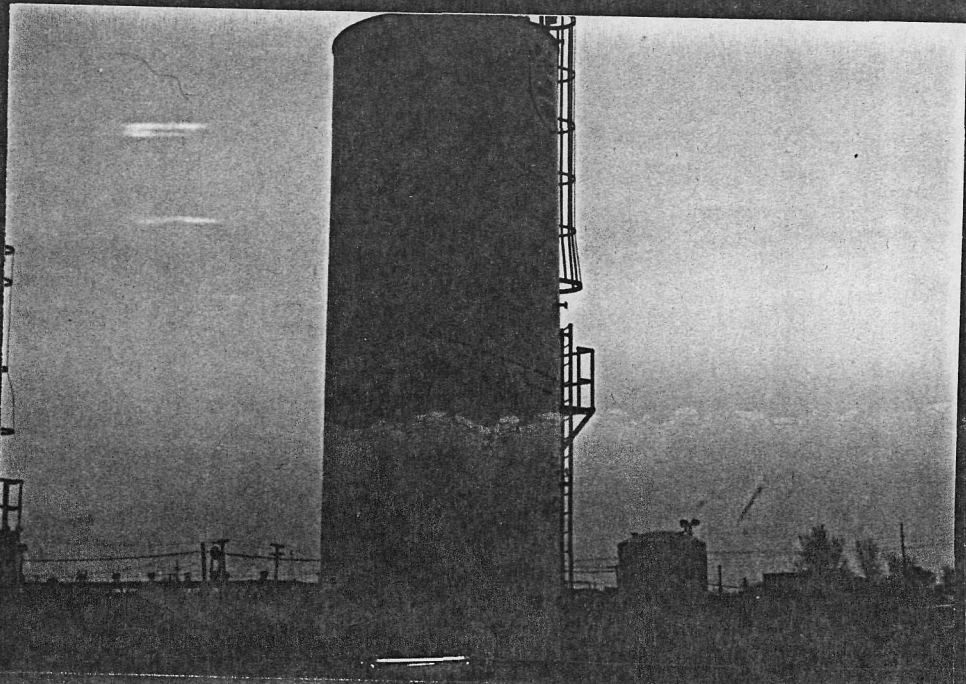
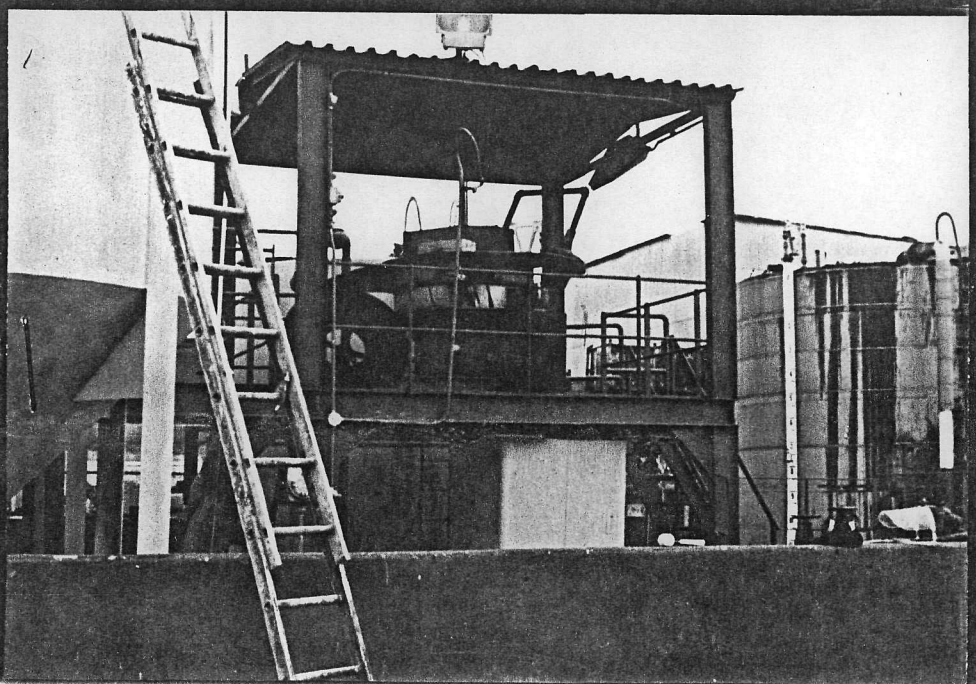
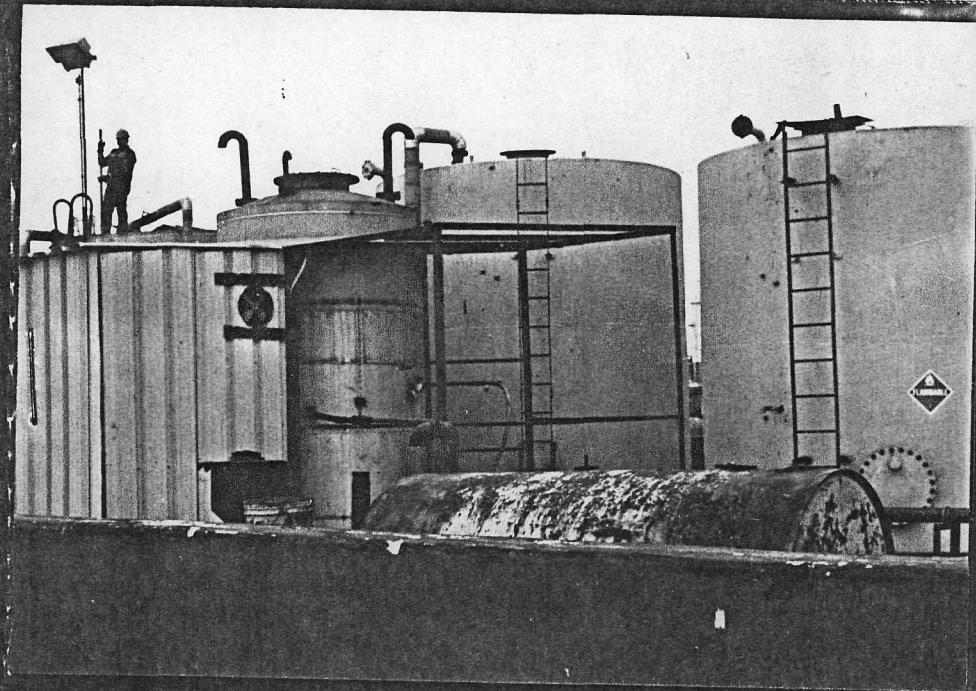
None

Proximity to Nearest Residence, Waterway, or other Exposure Potential-

150 feet southwest of maintenance building

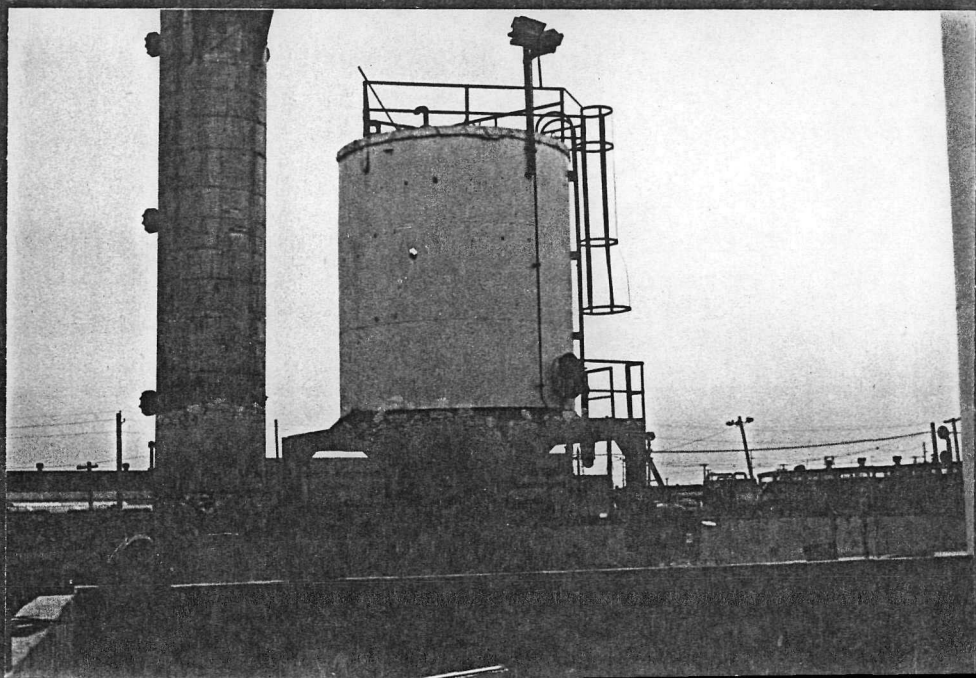
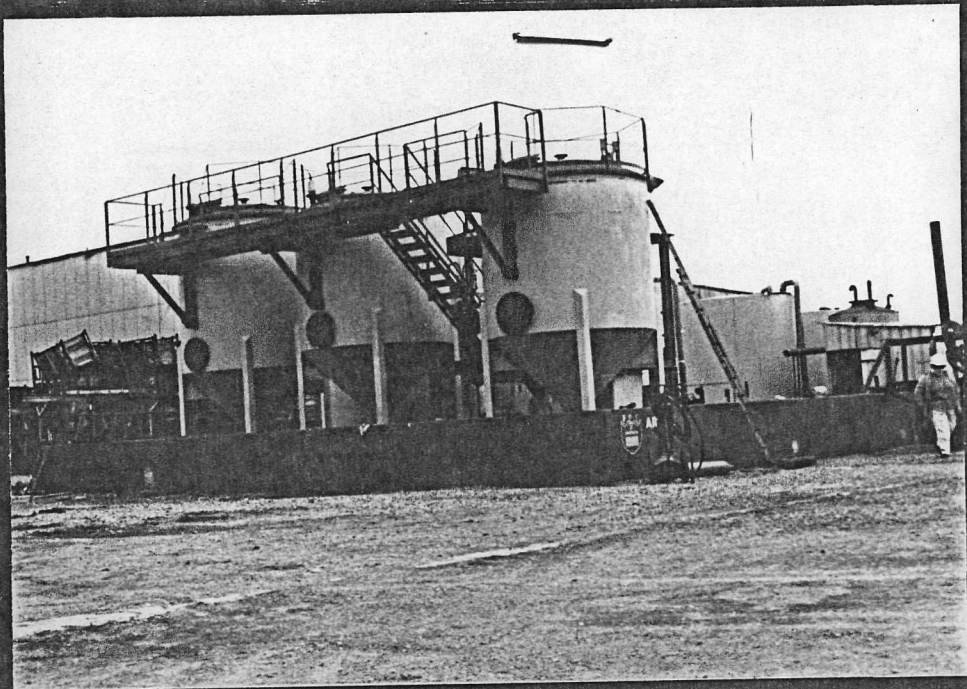
Comments -

Migration from groundwater is very slim



POLLUTION CONTROL INDUSTRIES of AMERICA Lake Co. File 3B





Division Control Industries of America  
 Lakeland Co. File 3B